

GEORGIA STATE BOARD OF PODIATRY EXAMINERS  
237 COLISEUM DRIVE, MACON, GA 31217-3858  
(478) 207-2440 [TELEPHONE] \* (866) 888-7127 [FAX] \* [www.sos.state.ga.us/plb/podiatry](http://www.sos.state.ga.us/plb/podiatry)

Refer to Board Rule 500-5 \*\*\*\*\* **CONTINUING EDUCATION AUDIT REPORT** \*\*\*\*\* Refer to Board Rule 500-5

AREA	ACTIVITY	SPONSORSHIP (FULL NAME)	LOCATION (CITY/STATE)	DATE(S) (M/D/YY)	# OF CLOCK HOURS/DAYS

- Each CE certificate submitted for audit must contain the licensee's name, the title of the CE activity, the name of the sponsoring organization, the number of credit hours earned and the date and location of the CE event. Use additional copies of this form if needed.
- ONLY IF SELECTED FOR A CE AUDIT:** FAX THE COMPLETED FORM AND SUPPORTING DOCUMENTS TO: 866-888-7127, ATT: PODIATRY BOARD or MAIL THIS FORM AND SUPPORTING DOCUMENTS TO: PODIATRY BOARD, 237 COLISEUM DRIVE, MACON, GA 31217 or, E-MAIL THIS FORM COMPLETED ALONG WITH SUPPORTING DOCUMENTS TO: [YLeSane@sos.ga.gov](mailto:YLeSane@sos.ga.gov)  
12-5-11